

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF INDIANA

Case number (if known)

Chapter 11 Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>IQPack LLC</u>		
2. All other names debtor used in the last 8 years	<p>Include any assumed names, trade names and <i>doing business as</i> names</p>		
3. Debtor's federal Employer Identification Number (EIN)	<u>86-2472101</u>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	<u>300 Missouri Avenue, Suite 101</u> <u>Jeffersonville, IN 47130</u>	<p>Number, Street, City, State & ZIP Code</p> <p><u>Clark</u> County</p>	
		<p>P.O. Box, Number, Street, City, State & ZIP Code</p> <p>Location of principal assets, if different from principal place of business</p> <p>Number, Street, City, State & ZIP Code</p>	
5. Debtor's website (URL)	<u>https://iqpackglobal.com/</u>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor

IQPack LLC

Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. § 101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. § 781(3))
 None of the above

B. Check all that apply

Tax-exempt entity (as described in 26 U.S.C. §501)
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
 Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

Chapter 7
 Chapter 9
 Chapter 11. **Check all that apply:**

The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? No. Yes.

If more than 2 cases, attach a separate list.

District _____

When _____

Case number _____

District _____

When _____

Case number _____

Debtor	IQPack LLC		Case number (if known)				
Name _____							
10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?							
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.							
<p>List all cases. If more than 1, attach a separate list</p> <table border="0"> <tr> <td>Debtor</td> <td>Relationship</td> </tr> <tr> <td>District</td> <td>Case number, if known</td> </tr> </table>				Debtor	Relationship	District	Case number, if known
Debtor	Relationship						
District	Case number, if known						
11. Why is the case filed in this district? <i>Check all that apply:</i> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district. 							
12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? <ul style="list-style-type: none"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed. <p>Why does the property need immediate attention? (Check all that apply.)</p> <ul style="list-style-type: none"> <input type="checkbox"/> It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____ <input type="checkbox"/> It needs to be physically secured or protected from the weather. <input type="checkbox"/> It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options). <input type="checkbox"/> Other _____ <p>Where is the property? _____ Number, Street, City, State & ZIP Code _____</p> <p>Is the property insured?</p> <ul style="list-style-type: none"> <input type="checkbox"/> No <input type="checkbox"/> Yes. Insurance agency _____ Contact name _____ Phone _____ 							

Statistical and administrative information															
13. Debtor's estimation of available funds <i>Check one:</i> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Funds will be available for distribution to unsecured creditors. <input type="checkbox"/> After any administrative expenses are paid, no funds will be available to unsecured creditors. 															
14. Estimated number of creditors <table border="0"> <tr> <td><input checked="" type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 1,000-5,000</td> <td><input type="checkbox"/> 25,001-50,000</td> </tr> <tr> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 5001-10,000</td> <td><input type="checkbox"/> 50,001-100,000</td> </tr> <tr> <td><input type="checkbox"/> 100-199</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> More than 100,000</td> </tr> <tr> <td><input type="checkbox"/> 200-999</td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000	<input type="checkbox"/> 200-999		
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<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000													
<input type="checkbox"/> 200-999															
15. Estimated Assets <table border="0"> <tr> <td><input type="checkbox"/> \$0 - \$50,000</td> <td><input checked="" type="checkbox"/> \$1,000,001 - \$10 million</td> <td><input type="checkbox"/> \$500,000,001 - \$1 billion</td> </tr> <tr> <td><input type="checkbox"/> \$50,001 - \$100,000</td> <td><input type="checkbox"/> \$10,000,001 - \$50 million</td> <td><input type="checkbox"/> \$1,000,000,001 - \$10 billion</td> </tr> <tr> <td><input type="checkbox"/> \$100,001 - \$500,000</td> <td><input type="checkbox"/> \$50,000,001 - \$100 million</td> <td><input type="checkbox"/> \$10,000,000,001 - \$50 billion</td> </tr> <tr> <td><input type="checkbox"/> \$500,001 - \$1 million</td> <td><input type="checkbox"/> \$100,000,001 - \$500 million</td> <td><input type="checkbox"/> More than \$50 billion</td> </tr> </table>				<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion
<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion													
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<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion													
16. Estimated liabilities <table border="0"> <tr> <td><input type="checkbox"/> \$0 - \$50,000</td> <td><input checked="" type="checkbox"/> \$1,000,001 - \$10 million</td> <td><input type="checkbox"/> \$500,000,001 - \$1 billion</td> </tr> </table>				<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion									
<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion													

Debtor

IQPack LLC

Name

Case number (*if known*) \$50,001 - \$100,000
 \$100,001 - \$500,000
 \$500,001 - \$1 million \$10,000,001 - \$50 million
 \$50,000,001 - \$100 million
 \$100,000,001 - \$500 million \$1,000,000,001 - \$10 billion
 \$10,000,000,001 - \$50 billion
 More than \$50 billion

Debtor

IQPack LLC

Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 19, 2023
MM / DD / YYYY

X /s/ Kenny A. Rohleder

Signature of authorized representative of debtor

Kenny A. Rohleder

Printed name

Title Member/President**18. Signature of attorney****X /s/ April A. Wimberg**

Signature of attorney for debtor

Date September 19, 2023

MM / DD / YYYY

April A. Wimberg

Printed name

Dentons Bingham Greenebaum

Firm name

**3500 PNC Tower
101 South Fifth Street
Louisville, KY 40202**

Number, Street, City, State & ZIP Code

Contact phone (502) 587-3719Email address april.wimberg@dentons.com**95741 KY**

Bar number and State

Fill in this information to identify the case:

Debtor name IQPack LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

 Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration* _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 19, 2023X /s/ Kenny A. Rohleder

Signature of individual signing on behalf of debtor

Kenny A. Rohleder

Printed name

Member/President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **IQPack LLC**
 United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**
 Case number (if known): _____

Check if this is an
 amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Arbitration Association 120 Broadway 21st Floor New York, NY 10271	Sammi Powers SammiPowers@ADR.org					\$9,115.00
Buckeye Packaging Co, Inc. 12223 Marlboro Ave Alliance, OH 44601	Kelli Phillips kelli.phillips@buckeyepackaging.com (800) 860-2247	Goods provided under agreement				\$4,589.50
Chase 543 Fifth Avenue New York, NY 10017		Credit Card				\$47,138.20
CMC America 101 Woodwinds Industrial Ct, Ste T Cary, NC 27511-6202	Craig Hall craig.hall@cmcmerica.net (919) 650-3985					\$12,652.00
Commercial Logistics Corporation d/b/a Cornerstone LLC PO Box 766 Jeffersonville, IN 47131	cory@csgrealestate.com					\$6,667.18
Custom Kraft Pack 100 Technology Way Docks 2 & 3 Jeffersonville, IN 47130	James Koller james@customkraftpack.com (502)544-3860	Goods provided under agreement				\$6,733.87
Dentons Bingham Greenebaum LLP 3500 PNC Tower 101 South Fifth Street Louisville, KY 40202		Professional services				\$8,250.00

Debtor	IQPack LLC		Case number (if known)		
Name					
Name of creditor and complete mailing address, including zip code		Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.
					Total claim, if partially secured Deduction for value of collateral or setoff Unsecured claim
Felins W204N13055 Goldendale Rd Suite 400 Richfield, WI 53076	accountsreceivable @felins.com (414) 355-7747				\$16,754.91
LADDAWN PO Box 633485 Cincinnati, OH 45263	Paula Costa pcosta@laddawn.c om (978) 563-6194	Goods provided under agreement			\$32,528.87
nVENIA PO box 71948 Chicago, IL 60694	Robert Triol Support@supportp ro.pro (847) 678-4071				\$1,467.07
OBSA Operating Company, LLC 13300 Pioneer Trl Eden Prairie, MN 55347	psinner@vogellaw. com		Disputed		\$861,682.95
Pregis 29690 Network Place Chicago, IL 60673-1295	Irma Cervantes icervantes@pregis. com (574)-935-6191				\$59,785.60
Sitma Stretch Film PO Box 827627 34th Ave. S Philadelphia, PA 19182	Davon Lawrence davon.lawrence@s igmaplastics.com (888) 826-2224				\$61,550.25
Sitma USA, Inc. 8011 34th Avenue South Suite 436 Minneapolis, MN 55425	davon.lawrence@s igmaplastics.com				\$49,454.25
Strothman 325 Wst Main Street, Suite 1600 Louisville, KY 40202	jjones@strothman. com	Professional services provided under agreement			\$10,380.00

Fill in this information to identify the case:

Debtor name IQPack LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

 Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from Schedule A/B..... \$ 0.00

1b. Total personal property:

Copy line 91A from Schedule A/B..... \$ 1,118,429.21

1c. Total of all property:

Copy line 92 from Schedule A/B..... \$ 1,118,429.21

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$ 450,000.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of Schedule E/F..... \$ 43,852.24

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... +\$ 1,905,820.36

4. Total liabilities

Lines 2 + 3a + 3b

\$ 2,399,672.60

Fill in this information to identify the case:

Debtor name **IQPack LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) _____

 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?** No. Go to Part 2. Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
3. Checking, savings, money market, or financial brokerage accounts (Identify all)	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
3.1. Account 8128		Checking	8128
			\$54,675.62

4. Other cash equivalents (Identify all)**5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$54,675.62**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?** No. Go to Part 3. Yes Fill in the information below.**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Security Deposits - Commercial Logistics Corporation d/b/a Cornerstone	\$6,462.92
--	-------------------

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

9. Total of Part 2.	\$6,462.92
----------------------------	-------------------

Add lines 7 through 8. Copy the total to line 81.

Debtor IQPack LLC
NameCase number (*If known*) _____**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

No. Go to Part 4.
 Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less:	<u>41,124.84</u>	-	<u>0.00</u>	=	<u>\$41,124.84</u>
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$41,124.84**Part 4: Investments****13. Does the debtor own any investments?**

No. Go to Part 5.
 Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

No. Go to Part 6.
 Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

No. Go to Part 7.
 Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

No. Go to Part 8.
 Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Furniture and Equipment	<u>\$17,500.00</u>		<u>\$17,500.00</u>
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Software	<u>\$507,665.83</u>		<u>\$507,665.83</u>
42.	Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			

Debtor IQPack LLC
NameCase number (*If known*) _____

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86. \$525,165.83

44. **Is a depreciation schedule available for any of the property listed in Part 7?**
 No
 Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**
 No
 Yes

Part 8: Machinery, equipment, and vehicles46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.
 Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---	---	--	---------------------------------------

47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**
Sitma e-wrap 2.0 Machine \$0.00 \$491,000.00

51. **Total of Part 8.**
Add lines 47 through 50. Copy the total to line 87. \$491,000.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
 No
 Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
 No
 Yes

Part 9: Real property54. **Does the debtor own or lease any real property?**

No. Go to Part 10.
 Yes Fill in the information below.

Part 10: Intangibles and intellectual property59. **Does the debtor have any interests in intangibles or intellectual property?**

No. Go to Part 11.
 Yes Fill in the information below.

Debtor IQPack LLC
NameCase number (*If known*) _____**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**
Include all interests in executory contracts and unexpired leases not previously reported on this form. No. Go to Part 12. Yes Fill in the information below.

	Current value of debtor's interest
71. Notes receivable Description (include name of obligor)	
72. Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local)	
73. Interests in insurance policies or annuities <u>Hudson Excess Insurance Company</u>	<u>\$0.00</u>
 Insurance Investment Group <u>\$0.00</u>	
 74. Causes of action against third parties (whether or not a lawsuit has been filed)	
Insurance claim against IIG <u>Unknown</u>	
Nature of claim	<u>Contract claim</u>
Amount requested	<u>\$861,682.95</u>
 75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims	
 76. Trusts, equitable or future interests in property	
 77. Other property of any kind not already listed <i>Examples: Season tickets, country club membership</i>	
 78. Total of Part 11. <u>\$0.00</u> Add lines 71 through 77. Copy the total to line 90.	
 79. Has any of the property listed in Part 11 been appraised by a professional within the last year?	
<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes	

Debtor IQPack LLC
NameCase number (*If known*) _____Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$54,675.62</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$6,462.92</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$41,124.84</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$525,165.83</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$491,000.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$1,118,429.21</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$1,118,429.21</u>

Fill in this information to identify the case:

Debtor name IQPack LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

 Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 **Stock Yards Bank & Trust Company**
 Creditor's Name
Clarksville Branch
1040 East Main Street
Louisville, KY 40232-2890
 Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

March 29 2023

Last 4 digits of account number

8016

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor and its relative priority.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	\$450,000.00
\$450,000.00	\$450,000.00

Describe debtor's property that is subject to a lien

Inventory, accounts, equipment and general intangibles

Describe the lien

Commercial Guaranty & Collateral Pledge

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent
 Unliquidated
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$450,000.00**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **IQPack LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) _____

 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Buckeye Packaging Co, Inc. 12223 Marlboro Ave Alliance, OH 44601	\$4,589.50	\$0.00
	As of the petition filing date, the claim is: <i>Check all that apply.</i>		
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Date or dates debt was incurred		
	Basis for the claim: administrative expenses		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Custom Kraft Pack 100 Technology Way Docks 2 & 3 Jeffersonville, IN 47130	\$6,733.87	\$0.00
	As of the petition filing date, the claim is: <i>Check all that apply.</i>		
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Date or dates debt was incurred		
	Basis for the claim: administrative expenses		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		

Debtor	IQPack LLC Name	Case number (if known)
2.3	<p>Priority creditor's name and mailing address LADDAWN PO Box 633485 Cincinnati, OH 45263</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (2)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: administrative expenses</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	<p>Nonpriority creditor's name and mailing address Accutech Films, Inc. 620 Hardin Street Coldwater, OH 45828</p> <p>Date(s) debt was incurred __</p> <p>Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.2	<p>Nonpriority creditor's name and mailing address American Arbitration Association 120 Broadway 21st Floor New York, NY 10271</p> <p>Date(s) debt was incurred __</p> <p>Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$9,115.00
3.3	<p>Nonpriority creditor's name and mailing address American Excelsior Company 850 Ave H. East Arlington, TX 76011</p> <p>Date(s) debt was incurred __</p> <p>Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.4	<p>Nonpriority creditor's name and mailing address Arvco Container Corporation 845 Gibson St Kalamazoo, MI 49001</p> <p>Date(s) debt was incurred __</p> <p>Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.5	<p>Nonpriority creditor's name and mailing address Bluestem 13300 Pioneer Trl Eden Prairie, MN 55347</p> <p>Date(s) debt was incurred __</p> <p>Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00

Debtor	IQPack LLC Name	Case number (if known)	
3.6	Nonpriority creditor's name and mailing address Brecham Group 2220 Blackberry Ln Conway, AR 72034 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.7	Nonpriority creditor's name and mailing address Chase 543 Fifth Avenue New York, NY 10017 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,138.20
3.8	Nonpriority creditor's name and mailing address CMC America 101 Woodwinds Industrial Ct, Ste T Cary, NC 27511-6202 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,652.00
3.9	Nonpriority creditor's name and mailing address CMC Italy 06012 CITTA DI CASTELLO PERUGIA, ITALY 39 075 851 8006 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.10	Nonpriority creditor's name and mailing address Commercial Logistics Corporation d/b/a Cornerstone LLC PO Box 766 Jeffersonville, IN 47131 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,667.18
3.11	Nonpriority creditor's name and mailing address Dentons Bingham Greenebaum LLP 3500 PNC Tower 101 South Fifth Street Louisville, KY 40202 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,250.00
3.12	Nonpriority creditor's name and mailing address Doug Jones 12502 Hummingbird Way Sellersburg, IN 47172 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Wages/Benefits</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$87,384.62

Debtor	IQPack LLC Name	Case number (if known)	
3.13	Nonpriority creditor's name and mailing address Felins W204N13055 Goldendale Rd Suite 400 Richfield, WI 53076 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,754.91
3.14	Nonpriority creditor's name and mailing address Grange Life Insurance Co. 671 South High Street Columbus, OH 43206 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.15	Nonpriority creditor's name and mailing address H.B. Fuller Company 1200 Willow Lake Blvd. Saint Paul, MN 55110 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.16	Nonpriority creditor's name and mailing address Honorable Charles Barr c/o Central Case Management Center 13727 Noel Road, Suite 1025 Dallas, TX 75240 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Arbitrator/Professional Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.17	Nonpriority creditor's name and mailing address Hudson Insurance Group Attn: Gretchen G. Sayers 2345 Grand Boulevard, Suite 1150 Kansas City, MO 64108 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.18	Nonpriority creditor's name and mailing address Humana Insurance Company P.O. Box 4600 Carol Stream, IL 60197 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.19	Nonpriority creditor's name and mailing address Independent 2 7825 National Turnpike Louisville, KY 40214 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	IQPack LLC Name	Case number (if known)
3.20	Nonpriority creditor's name and mailing address Indiana Attorney General Office 302 W. Washington Street 5th Floor Indianapolis, IN 46204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.21	Nonpriority creditor's name and mailing address Indiana Department of Revenue 100 N. Senate Ave. Room N203 - Bankruptcy Indianapolis, IN 46204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address Insperity 19001 CRESCENT SPRINGS DR Kingwood, TX 77339-3802 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address ISU - Auto Owners Insurance 7404 Hamilton Ave Cincinnati, OH 45231 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address ISU Insurance 2684 Charlestown Rd New Albany, IN 47150 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address John Moore 3001 E. Lobo Ridge New Albany, IN 47150 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Wages/Benefits</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	IQPack LLC Name	Case number (if known)
3.27	Nonpriority creditor's name and mailing address Kenny A. Rohleder 2209 Dearing Court Louisville, KY 40204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Wages/Benefits</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$43,000.00
3.28	Nonpriority creditor's name and mailing address Liberty Mutual Insurance P.O. Box 91013 Chicago, IL 60680 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$0.00
3.29	Nonpriority creditor's name and mailing address Mark Smedal, Esq. 600 West Main Street, Suite 100 Louisville, KY 40202 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$0.00
3.30	Nonpriority creditor's name and mailing address nVENIA PO box 71948 Chicago, IL 60694 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,467.07
3.31	Nonpriority creditor's name and mailing address OBSA Operating Company, LLC 13300 Pioneer Trl Eden Prairie, MN 55347 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$861,682.95
3.32	Nonpriority creditor's name and mailing address Pregis 29690 Network Place Chicago, IL 60673-1295 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$59,785.60
3.33	Nonpriority creditor's name and mailing address Sitma Stretch Film PO Box 827627 34th Ave. S Philadelphia, PA 19182 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$61,550.25

Debtor	IQPack LLC Name	Case number (if known)
3.34	Nonpriority creditor's name and mailing address Sitma USA, Inc. 8011 34th Avenue South Suite 436 Minneapolis, MN 55425 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$49,454.25
3.35	Nonpriority creditor's name and mailing address Strothman 325 Wst Main Street, Suite 1600 Louisville, KY 40202 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$10,380.00
3.36	Nonpriority creditor's name and mailing address Vogal Law Firm 218 NP Avenue PO Box 1389 Fargo, ND 58107-1389 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$0.00
3.37	Nonpriority creditor's name and mailing address Vorticode 685 W. Green Street Scottsburg, IN 47170 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$0.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
 5b. Total claims from Part 2

5c. Total of Parts 1 and 2
 Lines 5a + 5b = 5c.

5a.	\$	43,852.24
5b.	+	1,905,820.36
5c.	\$	1,949,672.60

Fill in this information to identify the case:

Debtor name IQPack LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

 Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

 No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form. Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest

Stocking Agreement

State the term remaining

List the contract number of any government contract _____

American Woodmark Corporation
561 Shady Elm Road
Winchester, VA 22602

2.2. State what the contract or lease is for and the nature of the debtor's interest

Consulting Agreement

State the term remaining

List the contract number of any government contract _____

American Woodmark Corporation
561 Shady Elm Road
Winchester, VA 22602

2.3. State what the contract or lease is for and the nature of the debtor's interest

Commercial Lease

State the term remaining

List the contract number of any government contract _____

Commercial Logistics Corporation
d/b/a Cornerstone
PO Box 766
Jeffersonville, IN 47131

2.4. State what the contract or lease is for and the nature of the debtor's interest

Bookkeeping services

State the term remaining

List the contract number of any government contract _____

Strothman
300 Missouri Ave
Suite 101
Jeffersonville, IN 47130

Debtor 1 **IQPack LLC**

First Name

Middle Name

Last Name

Case number (if known) _____

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest

Business packaging, transportation, labor, sustainability, and warehouse optimization services, packaging products, data analytics and software development.

State the term remaining

List the contract number of any government contract _____

**Vorticode
685 W. Green Street
Scottsburg, IN 47170**

Fill in this information to identify the case:

Debtor name IQPack LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

 Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1	John Moore	3001 E. Lobo Ridge New Albany, IN 47150	Stock Yards Bank & Trust Company	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2	Terry Moore	3001 E. Lobo Ridge New Albany, IN 47150	Stock Yards Bank & Trust Company	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name IQPack LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

For prior year:

From 1/01/2022 to 12/31/2022

Operating a business

\$2,735,419.00

Other _____

For year before that:

From 1/01/2021 to 12/31/2021

Operating a business

\$1,832,952.00

Other _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from
each source
(before deductions and
exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

3.1. **See Attached Schedule**

\$0.00

Secured debt
 Unsecured loan repayments
 Suppliers or vendors
 Services
 Other _____

Debtor IQPack LLC

Case number (if known)

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. John Moore 3001 E. Lobo Ridge New Albany, IN 47150	March 1, 2023	\$15,000.00	Distribution in lieu of salary

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. OBSA Opearting Company, LLC v. IQPack, LLC 01-22-0000-7601	Commercial Dispute	American Arbitration Association 120 Broadway 21st Floor New York, NY 10271	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000** None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Debtor IQPack LLC

Case number (if known) _____

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>			

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Dentons Bingham Greenebaum LLP 3500 PNC Tower 101 South Fifth Street Louisville, KY 40202		6/28/2023; 9/14/2023	\$20,000.00
<hr/>			
<hr/>			

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

 None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

 None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 John Moore 3001 E. Lobo Ridge New Albany, IN 47150	Distribution in lieu of salary	March 1, 2023	\$15,000.00
<hr/>			
<hr/>			

Relationship to debtor

Managing Member

Debtor IQPack LLC

Case number (if known) _____

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

 Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?** No. Go to Part 10. Yes. Does the debtor serve as plan administrator?**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

 None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

 None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
---	--	-----------------------------	----------------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

Debtor IQPack LLC

Case number (if known) _____

 None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
---------------------------	-----------------------------------	-----------------------------	----------------------------

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No.
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No.
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

No.
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

 None

Debtor IQPack LLC

Case number (if known)

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

 None

Name and address

Date of service
From-To26a.1. Strothman
325 Wst Main Street, Suite 1600
Louisville, KY 40202

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

 None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None

Name and address

If any books of account and records are
unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.Name of the person who supervised the taking of the
inventory

Date of inventory

The dollar amount and basis (cost, market,
or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Douglas Jones	12502 Hummingbird Way Sellersburg, IN 47172	Member	19.00
John Moore	3001 E. Lobo Ridge New Albany, IN 47150	Managing Member	57.00
Terry Moore	3001 E. Lobo Ridge 47150	Member	9.50

Debtor IQPack LLC

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Andrew Benzinger	718 Sunglow Street Ft Mitchell, KY 41017	Member	9.50
Kenny A. Rohleider	2209 Dearing Court Louisville, KY 40204	Member	5.00

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No
 Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No
 Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No
 Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
--------------------------	--

Debtor IQPack LLC

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 19, 2023/s/ Kenny A. Rohleder

Signature of individual signing on behalf of the debtor

Kenny A. Rohleder

Printed name

Position or relationship to debtor

Member/President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No
 Yes

United States Bankruptcy Court
Southern District of Indiana

In re IQPack LLC

Debtor(s)

Case No.
Chapter11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Andrew Benzinger 718 Sundglow Street Ft Mitchell, KY 41017	Member	9.50	
Douglas Jones 12502 Hummingbird Way Sellersburg, IN 47172	Member	19.00	
John Moore 3001 E. Lobo Ridge New Albany, IN 47150	Member	57.00	
Kenny Rohleder 2209 Dearing Court Louisville, KY 40204	Member	5.00	
Terry Moore 3001 E. Lobo Ridge New Albany, IN 47150	Member	9.50	

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Member/President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date September 19, 2023Signature /s/ Kenny A. Rohleder
Kenny A. Rohleder

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

Verification of Creditor List (rev 12/01/18)

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF INDIANA

In re: _____ Case No. _____
IQPack LLC _____

Debtor(s).) Check if this form is submitted with an amended creditor
list.

VERIFICATION OF CREDITOR LIST

(I/We) declare under penalty of perjury that all entities included or to be included in Schedules D, E/F, G, and H are listed in the creditor list submitted with this verification. This includes all creditors, parties to leases and executory contracts, and codebtors.

(I/We) declare that the names and addresses of the listed entities are true and correct to the best of (my/our) knowledge.

(I/We) understand that (I/we) must file an amended creditor list and pay an amendment fee if there are entities listed on (my/our) schedules that are not included in the creditor list submitted with this verification.

Dated: September 19, 2023

/s/ Kenny A. Rohleder
Kenny A. Rohleder
Signature of Debtor

Signature of Joint Debtor

(Note: Certificate of Service not required.)

ACCUTECH FILMS, INC.
620 HARDIN STREET
COLDWATER, OH 45828

AMERICAN ARBITRATION ASSOCIATION
120 BROADWAY 21ST FLOOR
NEW YORK, NY 10271

AMERICAN EXCELSIOR COMPANY
850 AVE H. EAST
ARLINGTON, TX 76011

AMERICAN WOODMARK CORPORATION
561 SHADY ELM ROAD
WINCHESTER, VA 22602

ARVCO CONTAINER CORPORATION
845 GIBSON ST
KALAMAZOO, MI 49001

BLUESTEM
13300 PIONEER TRL
EDEN PRAIRIE, MN 55347

BRECHAM GROUP
2220 BLACKBERRY LN
CONWAY, AR 72034

BUCKEYE PACKAGING CO, INC.
12223 MARLBORO AVE
ALLIANCE, OH 44601

CHASE
543 FIFTH AVENUE
NEW YORK, NY 10017

CMC AMERICA
101 WOODWINDS INDUSTRIAL CT, STE T
CARY, NC 27511-6202

CMC ITALY
06012 CITTA DI CASTELLO
PERUGIA, ITALY 39 075 851 8006

COMMERCIAL LOGISTICS CORPORATION
D/B/A CORNERSTONE LLC
PO BOX 766
JEFFERSONVILLE, IN 47131

CUSTOM KRAFT PACK
100 TECHNOLOGY WAY DOCKS 2 & 3
JEFFERSONVILLE, IN 47130

DENTONS BINGHAM GREENEBAUM LLP
3500 PNC TOWER
101 SOUTH FIFTH STREET
LOUISVILLE, KY 40202

DOUG JONES
12502 HUMMINGBIRD WAY
SELLERSBURG, IN 47172

FELINS
W204N13055 GOLDENDALE RD SUITE 400
RICHFIELD, WI 53076

GRANGE LIFE INSURANCE CO.
671 SOUTH HIGH STREET
COLUMBUS, OH 43206

H.B. FULLER COMPANY
1200 WILLOW LAKE BLVD.
SAINT PAUL, MN 55110

HONORABLE CHARLES BARR
C/O CENTRAL CASE MANAGEMENT CENTER
13727 NOEL ROAD, SUITE 1025
DALLAS, TX 75240

HUDSON INSURANCE GROUP
ATTN: GRETCHEN G. SAYERS
2345 GRAND BOULEVARD, SUITE 1150
KANSAS CITY, MO 64108

HUMANA INSURANCE COMPANY
P.O. BOX 4600
CAROL STREAM, IL 60197

INDEPENDENT 2
7825 NATIONAL TURNPIKE
LOUISVILLE, KY 40214

INDIANA ATTORNEY GENERAL OFFICE
302 W. WASHINGTON STREET 5TH FLOOR
INDIANAPOLIS, IN 46204

INDIANA DEPARTMENT OF REVENUE
100 N. SENATE AVE.
ROOM N203 - BANKRUPTCY
INDIANAPOLIS, IN 46204

INSPERITY
19001 CRESCENT SPRINGS DR
KINGWOOD, TX 77339-3802

INTERNAL REVENUE SERVICE
PO BOX 7346
PHILADELPHIA, PA 19101

ISU - AUTO OWNERS INSURANCE
7404 HAMILTON AVE
CINCINNATI, OH 45231

ISU INSURANCE
2684 CHARLESTOWN RD
NEW ALBANY, IN 47150

JOHN MOORE
3001 E. LOBO RIDGE
NEW ALBANY, IN 47150

KENNY A. ROHLEDER
2209 DEARING COURT
LOUISVILLE, KY 40204

LADDAWN
PO BOX 633485
CINCINNATI, OH 45263

LIBERTY MUTUAL INSURANCE
P.O. BOX 91013
CHICAGO, IL 60680

MARK SMEDAL, ESQ.
600 WEST MAIN STREET, SUITE 100
LOUISVILLE, KY 40202

NVENIA
PO BOX 71948
CHICAGO, IL 60694

OBSA OPERATING COMPANY, LLC
13300 PIONEER TRL
EDEN PRAIRIE, MN 55347

PREGIS
29690 NETWORK PLACE
CHICAGO, IL 60673-1295

SITMA STRETCH FILM
PO BOX 827627
34TH AVE. S
PHILADELPHIA, PA 19182

SITMA USA, INC.
8011 34TH AVENUE SOUTH
SUITE 436
MINNEAPOLIS, MN 55425

STOCK YARDS BANK & TRUST COMPANY
CLARKSVILLE BRANCH
1040 EAST MAIN STREET
LOUISVILLE, KY 40232-2890

STROTHMAN
325 WST MAIN STREET, SUITE 1600
LOUISVILLE, KY 40202

TERRY MOORE
3001 E. LOBO RIDGE
NEW ALBANY, IN 47150

VOGAL LAW FIRM
218 NP AVENUE
PO BOX 1389
FARGO, ND 58107-1389

VORTICODE
685 W. GREEN STREET
SCOTTSBURG, IN 47170

**United States Bankruptcy Court
Southern District of Indiana**

In re IQPack LLC

Debtor(s)

Case No.
Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for IQPack LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [Check if applicable]

September 19, 2023

Date

/s/ April A. Wimberg

April A. Wimberg

Signature of Attorney or Litigant

Counsel for IQPack LLC

Dentons Bingham Greenebaum

3500 PNC Tower

101 South Fifth Street

Louisville, KY 40202

(502) 587-3719 Fax:(502) 540-2135

april.wimberg@dentons.com

IQpack**1010 Bank 8128 Bank Balance: 54675.62 Ending Balance: \$54,675.62**

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
06/15/2023	267599402	John Hancock Insurance	3-mo KEYMAN Life Insurance policy paid online by JMoore		\$1,882.45		R	\$97,154.96
	Expense	7900 Officer Life Insurance						
06/15/2023			\$0 Liability due, no GA invoices or taxes collected in previous period		\$0.00		R	\$97,154.96
	Sales Tax Payment	-Split-						
06/15/2023		Strothman and Company PLLC	Account no. 95038.000 In# 61721partial pmt		\$3,500.00		R	\$93,654.96
	Bill Payment	2000 Accounts Payable						
06/15/2023		Custom Kraft Pack LLC	Invoice no. 1024A		\$1,000.00		R	\$92,654.96
	Bill Payment	2000 Accounts Payable						
06/16/2023	SC23031		to post payroll 06.16.23		\$19,537.12		R	\$73,117.84
	Journal	-Split-						
06/19/2023		Dennis Uniform Mfg, LLC	06.19.23 Dennis Uniform CC payment including \$309.32 CC surcharge		\$8,042.32		R	\$81,160.16
	Deposit	-Split-						
06/19/2023		American Funds	06.16.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		R	\$79,935.15
	Expense	-Split-						
06/20/2023	107827	American Woodmark - NP [IN]	06.20.23 Inv# 10200 Remittance		\$1,600.00		R	\$81,535.15
	Payment	1100 Accounts Receivable						
06/20/2023	2023AutoDebit	John Hancock Insurance	1-mo KEYMAN Life Insurance policy paid online by JMoore and set up to be monthly withdrawal		\$617.47		R	\$80,917.68
	Expense	7900 Officer Life Insurance						
06/20/2023		Chase	AUTOMATIC PAYMENT - THANK		\$2,000.00		R	\$78,917.68
	Credit Card Pmt	2054 Chase Credit Card - Master - 4371 - JM						
06/21/2023	108920	RSI Home Products Manufacturing, Inc.	06.21.23 Payment Inv#10205		\$1,600.00		R	\$80,517.68
	Payment	1100 Accounts Receivable		Corrugated Packaging				
06/22/2023			6.22.23 Rocky Brands CC Receipt Inv#10195 plus srchg \$1,111.63 and 06.23.23 Inv# 10210 LSC CC receipt		\$41,445.36		R	\$121,963.04
	Deposit	-Split-						

Date	Ref No. Type	Payee Account	Memo	Class Division	Payment	Deposit	Stat	Balance
							Auto	
06/23/2023		Strothman and Company PLLC	Acct no. 95038.000 Inv# 61721-Partial Pmt 2000 Accounts Payable		\$3,000.00		R	\$118,963.04
	Bill Payment							
06/23/2023		Pregis*	Account no. 1024480 Invoice no. 91378653		\$15,227.52		R	\$103,735.52
	Bill Payment	2000 Accounts Payable		Corrugated Packaging				
06/26/2023			06.26.23 AWC-IN inv#10206, AWC-AZ Inv#10207 Remittance Advice			\$168,505.84	R	\$272,241.36
	Deposit	-Split-						
06/28/2023		CMC America			\$14,102.92		R	\$258,138.44
	Bill Payment	2000 Accounts Payable		Corrugated Packaging				
06/28/2023		Cornerstone Group			\$6,667.18		R	\$251,471.26
	Bill Payment	2000 Accounts Payable						
06/28/2023		Pregis*	Account no. 1024480 Invoice no. 91399934		\$1,268.96		R	\$250,202.30
	Bill Payment	2000 Accounts Payable		Corrugated Packaging				
06/28/2023		Strothman and Company PLLC	Account no. 95038.000 Invoice no. 61721-Partial		\$3,000.00		R	\$247,202.30
	Bill Payment	2000 Accounts Payable						
06/28/2023		Dentons Bingham Greenbaum LLP	Client# 138888.000001 Inv# 4550980		\$10,000.00		R	\$237,202.30
	Bill Payment	2000 Accounts Payable		Administration				
06/29/2023		Stock Yards Bank	PAYMENT TO COMMERCIAL LOAN 21822 interest PAYMENT TO COMMERCIAL LOAN 218228016		\$3,405.12		R	\$233,797.18
	Expense	9010 Interest Expense						
06/29/2023		John Hancock Insurance	1-mo KEYMAN Life Insurance policy paid online by JMoore and set up to be monthly withdrawal		\$617.47		R	\$233,179.71
	Expense	7900 Officer Life Insurance						
06/30/2023	6019217	American Funds	06.30.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		R	\$231,954.70
	Expense	-Split-						
06/30/2023	SC23034		to post payroll 06.30.23		\$19,537.12		R	\$212,417.58
	Journal	-Split-						
07/03/2023	092580	LSC	07.02.23 inv#10211 LSC CC Communications Receipt \$1,833.84		\$1,833.84		R	\$214,251.42
	Payment	1100 Accounts Receivable		Packaging Parts				
07/03/2023	111028	RSI Home Products - CA	07.03.23 RSI-CA inv#10208 Remittance Advice		\$5,160.00		R	\$219,411.42
	Payment	1100 Accounts Receivable		Corrugated Packaging				

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
07/05/2023	07.2023	Liberty Mutual Insurance	LIBERTY MUTUAL 301484970 6036564 JUL2023		\$658.62		R	\$218,752.80
	Expense	6700 Business Insurance		Administration				
			VERIZON WIRELESS PAYMENTS 094241					
07/06/2023	07.2023	Verizon Wireless	VERIZON WIRELESS PAYMENTS 567400001-Jul2023		\$430.56		R	\$218,322.24
	Expense	7600 Telephone Expense						
			2021 IN DOR Demand Notice L0008123814 dated 06.21.23					
07/06/2023	mmx5f5	Indiana Dept. of Revenue (Income Taxes)	for \$442 tax balance plus \$97.68 penalty and taxes, notice in WP 07.6.01		\$539.68		R	\$217,782.56
	Expense	9200 Taxes - Income						
07/06/2023		Strothman and Company PLLC			\$1,275.00		R	\$216,507.56
	Bill Payment	2000 Accounts Payable						
07/06/2023		nVenia LLC			\$2,412.65		R	\$214,094.91
	Bill Payment	2000 Accounts Payable						
07/06/2023		NEUTECH Packaging Systems			\$795.41		R	\$213,299.50
	Bill Payment	2000 Accounts Payable		Packaging Parts				
07/10/2023	07.2023	Clearent LLC	CLEARENT LLC MonthlyFee 58800000 CLEARENT LLC MonthlyFee XXXXXXXXXXXX9968		\$1,616.32		R	\$211,683.18
	Expense	6040 Bank Service Charges						
07/11/2023		Stock Yards Bank	Service Charge		\$132.50		R	\$211,550.68
	Expense	6040 Bank Service Charges						
07/11/2023		Custom Kraft Pack LLC	Invoice no. 1038A		\$95,911.20		R	\$115,639.48
	Bill Payment	2000 Accounts Payable		Molded Packaging				
07/12/2023		John Hancock Insurance	PAYMENT JOHN HANCOCK USA TRN*1*P PAYMENT JOHN HANCOCK USA TRN*1*P7308553\		\$1,882.45	R	\$117,521.93	
	Deposit	7900 Officer Life Insurance						
07/13/2023	07.2023	Strothman and Company - Conf.rn	07.2023 conference room rental		\$450.00	R	\$117,971.93	
	Payment	1100 Accounts Receivable		Administration				
07/14/2023	SC23036		to post payroll 07.14.23		\$19,537.12		R	\$98,434.81
	Journal	-Split-American						
07/17/2023	113605	Woodmark - DP [WV]	AWC-WV #10212 payment [WV]		\$19,200.00	R	\$117,634.81	

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
	Payment	1100 Accounts Receivable		Molded Packaging				
07/17/2023	6439179	American Funds	07.14.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		R	\$116,409.80
	Expense	-Split-						
07/18/2023			\$0.00 06.2023 tax liability. Filed return online			\$0.00	R	\$116,409.80
	Sales Tax Payment	-Split-						
07/19/2023	114551	American Woodmark - NP	AWC-IN Inv#10214 paid [IN]			\$1,600.00	R	\$118,009.80
	Payment	1100 Accounts Receivable						
07/20/2023		Felins	Account no. IQPACK0000 Invoice no. 130516-PARTIA		\$16,000.00		R	\$102,009.80
	Bill Payment	2000 Accounts Payable		Packaging				
07/20/2023		Strothman and Company PLLC	Account no. 95038.000 Invoice no. 63317			\$3,500.00	R	\$98,509.80
	Bill Payment	2000 Accounts Payable						
07/20/2023		CMC America	Invoice no. 21038			\$12,652.00	R	\$85,857.80
	Bill Payment	2000 Accounts Payable		Corrugated Packaging				
07/20/2023		Packaging Systems Integration	Invoice no. 30999			\$222.36	R	\$85,635.44
	Bill Payment	2000 Accounts Payable		Packaging Parts				
07/21/2023	7370	OBSA Operating Company, LLC (Bluestem)	Payment of freight per telephone call with Ken R. on 07.24.2023			\$13,764.36	R	\$99,399.80
	Payment	1100 Accounts Receivable		Freight				
07/24/2023		Chase	07.2023 auto payment		\$2,000.00		R	\$97,399.80
	Credit Card Pmt	2054 Chase Credit Card - Master - 4371 - JM						
07/28/2023	SC23039		to post payroll 07.28.23			\$19,537.12	R	\$77,862.68
	Journal	-Split-						
07/28/2023		John Hancock Insurance	PAYMENT JOHN HANCOCK MAN TRN*1*E PAYMENT JOHN HANCOCK MAN TRN*1*E20927416\			\$617.47	R	\$77,245.21
	Expense	7900 Officer Life Insurance						
07/31/2023	116852	American Woodmark - DP [WV]	07.31.23 AWC-WV Invoice 10216 Remittance Advice			\$1,137.60	R	\$78,382.81
	Payment	1100 Accounts Receivable		Molded Packaging				
07/31/2023	07.2023Int	Stock Yards Bank	PAYMENT TO COMMERCIAL LOAN 21822 interest PAYMENT TO COMMERCIAL LOAN 218228016			\$3,468.74	R	\$74,914.07
	Expense	9010 Interest Expense						

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
07/31/2023	07.28.23Email	Biofourmis, Inc.:2023001- Biofourmis	07.31.23 Biofourmis remittance			\$5,548.50	R	\$80,462.57
	Payment	1100 Accounts Receivable		Corrugated Packaging				
07/31/2023		American Funds	07.28.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		R	\$79,237.56
	Expense	-Split-						
08/03/2023		Custom Kraft Pack LLC	Invoice no. 1076A		\$1,000.00		R	\$78,237.56
	Bill Payment	2000 Accounts Payable						
08/03/2023		Cornerstone Group	Invoice no. 24734		\$6,667.18		R	\$71,570.38
	Bill Payment	2000 Accounts Payable						
08/03/2023		Vorticode	Invoices# 2023.05, 2023.06		\$1,400.00		R	\$70,170.38
	Bill Payment	2000 Accounts Payable						
08/04/2023	2465265	Liberty Mutual Insurance	LIBERTY MUTUAL 301484970 2465265 AUG2023		\$658.62		R	\$69,511.76
	Expense	6700 Business Insurance		Administration				
08/07/2023			08.07.23 multi, AWC-IN inv#10217, AWC-WV #10218 Remittance Advice			\$41,181.64	R	\$110,693.40
	Deposit	-Split-						
08/07/2023	52303	Dennis Uniform Mfg, LLC	08.07.23 DennisU ck 52303 Inv 10209 \$9,382.50			\$9,382.50	R	\$120,075.90
	Payment	1100 Accounts Receivable		Flexible Packaging				
08/07/2023	08.2023	Clearent LLC	CLEARENT LLC MonthlyFee 58800000 CLEARENT LLC MonthlyFee XXXXXXXXXXXX9968		\$101.39		R	\$119,974.51
	Expense	6040 Bank Service Charges						
08/08/2023	070384	LSC	8-8-23 inv#10221 LSC CC Communications Receipt \$4,707.45			\$4,707.45	R	\$124,681.96
	Payment	1100 Accounts Receivable		Flexible Packaging				
08/08/2023	08.2023	Verizon Wireless	VERIZON WIRELESS PAYMENTS 094241 VERIZON WIRELESS PAYMENTS 567400001-Aug2023		\$570.64		R	\$124,111.32
	Expense	7600 Telephone Expense						
08/09/2023		Strothman and Company PLLC	Account no. 95038.000 Invoice no. 63553		\$3,500.00		R	\$120,611.32
	Bill Payment	2000 Accounts Payable						
08/09/2023		Laddawn	Account no. 573333 Invoice no. 3151293		\$6,036.46		R	\$114,574.86
	Bill Payment	2000 Accounts Payable		Molded Packaging				
08/10/2023		Stock Yards Bank	Service Charge		\$131.00		R	\$114,443.86

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
	Expense	9010 Interest Expense						
08/11/2023	SC23041		to post payroll 08.11.23		\$19,537.12		R	\$94,906.74
	Journal	-Split-						
08/14/2023	119546	RSI Home Products Manufacturing, Inc.	08.14.23 inv#10219 RSI-TX Remittance Advice			\$1,960.00	R	\$96,866.74
	Payment	1100 Accounts Receivable		Corrugated Packaging				
08/14/2023	611821687	Capital Group 6680	Quarterly management fees		\$125.00		R	\$96,741.74
	Expense	Professional Fees - Benefit Management		Administration				
08/14/2023	08.11.23PR	American Funds	08.11.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		R	\$95,516.73
	Expense	-Split-						
08/15/2023	AugConfRm	Strothman and Company - Conf.rm	ACH payment of			\$450.00	R	\$95,966.73
	Payment	1100 Accounts Receivable		Corrugated Packaging				
08/17/2023	Sales Tax Payment		07.2023 GA ST Liability \$0			\$0.00	R	\$95,966.73
08/17/2023		-Split-						
	Bill Payment	Custom Kraft Pack LLC	Bills# 1084A, 1102A, 1103A, 1129A		\$29,856.42		R	\$66,110.31
		2000 Accounts Payable		Molded Packaging				
08/21/2023	08.04.23Run	Shorr Packaging Corp	08.21.23 Recd ACH pmt from Shorr Pkg			\$6,437.21	R	\$72,547.52
	Payment	1100 Accounts Receivable		Administration				
08/21/2023		Chase	Monthly AutoDebit set up by J.Moore		\$2,000.00		R	\$70,547.52
	Credit Card Pmt	2054 Chase Credit Card - Master - 4371 - JM						
08/22/2023		Stock Yards Bank	IQPack LLC/ ****8016/LOAN FEE/ IQPack LLC/ ****8016/LOAN FEE/ MKRISTIANSEN/SJACKSON			\$42.00	R	\$70,505.52
	Expense	6040 Bank Service Charges						
08/22/2023		Green Mountain Technology	Invoice no. 2504		\$1,500.00		R	\$69,005.52
	Bill Payment	2000 Accounts Payable						
08/22/2023		Tompkins Ventures LLC	Invoice no. 08.14.23Biofourmis Commission-final		\$450.00		R	\$68,555.52
	Bill Payment	2000 Accounts Payable						
08/22/2023		Strothman and Company PLLC	Account no. 95038.000 Invoice no. 63919-partial pmt		\$2,000.00		R	\$66,555.52
	Bill Payment	2000 Accounts Payable						

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
08/22/2023		Vorticode	Invoice no. IQpack.2023.07-partial pmt		\$2,500.00		R	\$64,055.52
	Bill Payment	2000 Accounts Payable						
08/23/2023		Tompkins Ventures LLC	RETURN TOMPKINS VENTURE R29 SP - Wrong ACH Acct#		\$450.00		R	\$64,505.52
	Deposit	2000 Accounts Payable						
08/24/2023		Tompkins Ventures LLC	Inv #08.14.23Comm-final		\$450.00		R	\$64,055.52
	Bill Payment	2000 Accounts Payable						
08/25/2023 6980054		American Funds	08.25.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		R	\$62,830.51
	Expense	-Split-						
08/25/2023 SC23042			to post payroll 08.25.23		\$19,537.12		R	\$43,293.39
	Journal	-Split-						
08/28/2023 122849		American Woodmark - NP [IN]	08.28.23 inv#10220 AWC-IN Remittance Advice		\$1,600.00		R	\$44,893.39
	Payment	1100 Accounts Receivable						
08/29/2023 08.2023Int		Stock Yards Bank	PAYMENT TO COMMERCIAL LOAN 21822 interest PAYMENT TO COMMERCIAL LOAN 218228016		\$3,687.48		R	\$41,205.91
	Expense	9010 Interest Expense						
08/29/2023 E21946756-08.2023		John Hancock Insurance	PAYMENT JOHN HANCOCK MAN TRN*1*E PAYMENT JOHN HANCOCK MAN TRN*1*E20927416\		\$617.47		R	\$40,588.44
	Expense	7900 Officer Life Insurance						
08/30/2023 123600		American Woodmark - NP [IN]	08.30.23 AWC-IN inv#10222 Remittance Advice		\$104,497.92	R	\$145,086.36	
	Payment	1100 Accounts Receivable		Molded Packaging				
09/05/2023		Chase	Addtl payment issued by JMoore		\$2,000.00		C	\$143,086.36
	Credit Card Pmt	2054 Chase Credit Card - Master - 4371 - JM						
09/06/2023 09.2023		Verizon Wireless	VERIZON WIRELESS PAYMENTS 094241 VERIZON WIRELESS PAYMENTS 567400001-SEP2023		\$385.13		C	\$142,701.23
	Expense	7600 Telephone Expense						
09/06/2023 09.2023		Liberty Mutual Insurance	LIBERTY MUTUAL 301484970 2465265 SEP2023		\$658.62		C	\$142,042.61
	Expense	6700 Business Insurance		Administration				
09/06/2023		Strothman and Company PLLC	Account no. 95038.000 Invoice no. 63919-balance		\$1,500.00		C	\$140,542.61

Date	Ref No.	Payee	Memo	Class	Payment	Deposit	Stat	Balance
	Type	Account		Division			Auto	
	Bill Payment	2000 Accounts Payable						
09/06/2023		Cornerstone Group	Invoice no. 24821		\$6,667.18		C	\$133,875.43
	Bill Payment	2000 Accounts Payable						
09/06/2023		ANEW 401K TPA, LLC	Invoice no. 5896		\$335.00		C	\$133,540.43
	Bill Payment	2000 Accounts Payable		Administration				
09/08/2023 09.2023		Clearent LLC	CLEARENT LLC MonthlyFee 58800000 CLEARENT LLC MonthlyFee XXXXXXXXXXXX9968		\$184.70		C	\$133,355.73
	Expense	6040 Bank Service Charges						
09/08/2023 SC23046	Journal	-Split-	to post payroll 09.08.23		\$19,537.12		C	\$113,818.61
09/08/2023 016JEPQJM2RUJL2		Strothman and Company - Conf.rn	09.08.23 Strothman-conf remittance received		\$450.00		C	\$114,268.61
	Payment	1100 Accounts Receivable		Corrugated Packaging				
09/11/2023 125499		American Woodmark - DP [WV]	09.11.23 AWC-WV Invoice 10223 Remittance Advice			\$117,883.36	C	\$232,151.97
	Payment	1100 Accounts Receivable		Molded Packaging				
09/11/2023 6640701		American Funds	09.08.23 Payroll - EE/ER 401k Contributions.		\$1,225.01		C	\$230,926.96
	Expense	-Split-						
09/11/2023		Stock Yards Bank	Service Charge		\$131.00		C	\$230,795.96
	Expense	6040 Bank Service Charges						
09/12/2023		Pregis*	Account no. 1024480 Invoice no. 993263		\$2,240.00		C	\$228,555.96
	Bill Payment	2000 Accounts Payable		Corrugated Packaging				
09/14/2023	Sales Tax Payment	-Split-	\$0 Liability, no payment due		\$0.00			\$228,555.96
09/14/2023		Dentons Bingham Greenbaum LLP	Client# 138888.000001,Invoice no. 4550980-Payment#2		\$10,000.00		C	\$218,555.96
	Bill Payment	2000 Accounts Payable		Administration				
09/14/2023		Custom Kraft Pack LLC	Invoice no. 1163A		\$81,995.76		C	\$136,560.20
	Bill Payment	2000 Accounts Payable		Molded Packaging				
09/14/2023		Custom Kraft Pack LLC	Invoice no. 1138A		\$72,304.58		C	\$64,255.62
	Bill Payment	2000 Accounts Payable		Molded Packaging				
09/14/2023		Strothman and Company PLLC	Account no. 95038.000 Invoice no. 64074-partial		\$2,000.00		C	\$62,255.62
	Bill Payment	2000 Accounts Payable						

Date	Ref No. Type	Payee Account	Memo	Class Division	Payment	Deposit	Stat	Balance Auto
09/14/2023	Bill Payment	Vorticode 2000 Accounts Payable	Invoice no. IQpack.2023.07- balance		\$7,580.00		C	\$54,675.62